

APPLICATION FOR UNITED STATES PATENT Declaration and Power of Attorney

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: IMAGE STRIPPING MEMBER, AND IMAGE STRIPPING APPARATUS AND IMAGE

1 STRIPPING METHOD USING THE IMAGE STRIPPING MEMBER

described and claimed in the specification:

Check one

- a. attached hereto.
b. filed on _____ as Application Serial No. _____ and amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No. 9-853 filed on January 7, 1997

Japanese Patent Application No. 9-166305 filed on June 23, 1997

Japanese Patent Application No. 9-360968 filed on December 26, 1997

The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s):

- 2 If there are no corresponding applications, insert "NONE". NONE

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562
and Thomas J. Pardini, Reg. No. 30,411.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

3 Typewritten Full Name of Sole or First Inventor	<u>Tomoo</u>	<u>Kobayashi</u>	
	Given Name	Middle Initial	Family Name
**4 Inventor's Signature		<u>Tomoo</u>	<u>Kobayashi</u>
**5 Date of Signature		<u>December</u>	<u>26</u>
	Month	Day	Year
6 Residence <u>Minami-Ashigara-shi</u>	<u>Kanagawa</u>	<u>Japan</u>	
7 Citizenship <u>Japanese</u>	State or Province	Country	
8 Post Office Address (Insert complete mailing address, including country)	<u>c/o FUJI XEROX CO., LTD. of 1600, Takematsu,</u> <u>Minami-Ashigara-shi, Kanagawa, Japan</u>		

*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

**Note to Inventor: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

3 Typewritten Full Name of Second Joint Inventor (if any)	Kaoru	Torikoshi	
	Given Name	Middle Initial	Family Name
*4 Inventor's Signature	 Kaoru		
*5 Date of Signature	December	26	1997
Month	Month	Day	Year
*6 Residence	Minami-Ashigara-shi	Kanagawa	Japan
	City	State or Province	Country
*7 Citizenship	Japanese		
8 Post Office Address <i>(Insert complete mailing address, including country)</i>	c/o FUJI XEROX CO., LTD. of 1600, Takematsu, Minami-Ashigara-shi, Kanagawa, Japan		
3 Typewritten Full Name of Third Joint Inventor (if any)	Tadakazu	Ezure	
	Given Name	Middle Initial	Family Name
*4 Inventor's Signature	 Tadakazu		
*5 Date of Signature	December	26	1997
Month	Month	Day	Year
*6 Residence	Ashigarakami-gun	Kanagawa	Japan
	City	State or Province	Country
*7 Citizenship	Japanese		
8 Post Office Address <i>(Insert complete mailing address, including country)</i>	c/o FUJI XEROX CO., LTD. of Green-Tech Nakai, 430 Sakai, Nakai-machi, Ashigarakami-gun, Kanagawa, Japan		
3 Typewritten Full Name of Fourth Joint Inventor (if any)	Given Name	Middle Initial	Family Name
*4 Inventor's Signature			
*5 Date of Signature	Month	Day	Year
*6 Residence	City	State or Province	Country
*7 Citizenship			
8 Post Office Address <i>(Insert complete mailing address, including country)</i>			
3 Typewritten Full Name of Fifth Joint Inventor (if any)	Given Name	Middle Initial	Family Name
*4 Inventor's Signature			
*5 Date of Signature	Month	Day	Year
*6 Residence	City	State or Province	Country
*7 Citizenship			
8 Post Office Address <i>(Insert complete mailing address, including country)</i>			

* Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.